


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2005 8:00 am
Secretary of State

06-17-2005 90003 038 ***150.00

DOCUMENT # P02000073611		
1. Entity Name COASTAL CASTLES AND CONDOS, INC.		

Principal Place of Business 2727 S OCEAN BLVD #602 HIGHLANDS BEACH, FL 33487	Mailing Address 2727 S OCEAN BLVD #602 HIGHLANDS BEACH, FL 33487
------------------------------------------------------------------------------------	------------------------------------------------------------------------

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

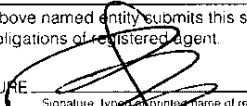


03212005 Chg-P CR2E034 (10/03)

4. FEI Number 59-1715542		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BLAKE, JUNE 2727 S OCEAN BLVD #602 HIGHLANDS BEACH, FL 33487		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

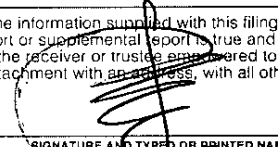
SIGNATURE  (NOTE: Registered Agent signature required when reinstating)

DATE 3-14-05

FILE NOW!!! FEES \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSV BLAKE, JUNE A 2727 S OCEAN BLVD HIGHLAND BEACH, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGAHAN, MARGARET 3100 S OCEAN BLVD #125D HIGHLAND BEACH, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EPPEL, GLENDA 3212 S OCEAN BLVD HIGHLAND BEACH, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 3-14-05 Daytime Phone #

**ATTACHMENT**
Division of Corporations

40088513

Annual Report

Document Number

P02000073611

Business Entity Name

COASTAL CASTLES AND CONDOS, INC.

FEI Number

591715542

FEI Number Status

Applied For

Not Applicable

Current

Certificate of Status Desired

Yes

No

\$8.75 each

Election Campaign Financing Trust Fund Contribution

Yes

No

Principal Place of Business

Address

2727 S OCEAN BLVD #602

Suite, Apt. #, etc.

City, State

HIGHLANDS BEACH

FL

Zip Code & Country

33487

Mailing Address

Address

2727 S OCEAN BLVD #602

Suite, Apt. #, etc.

City, State

HIGHLANDS BEACH

FL

Zip Code & Country

33487

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

BLAKE

JUNE

-or- RA Business Name

Address

2727 S OCEAN BLVD #602

Suite, Apt. #, etc.

City, State

HIGHLANDS BEACH

FL

Zip Code & Country

33487

US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name And Address

Title

PSV

ATTACHMENT 40088513
#P02000073611

Name (Last, First, Middle, Title) BLAKE JUNE A

-or- Entity Name

Street Address

2727 S OCEAN BLVD

City, State

HIGHLAND BEACH

FL

Zip Code & Country

33487

Title

D

Name (Last, First, Middle, Title)

MCGAHAN

MARGARET

-or- Entity Name

Street Address

3100 S OCEAN BLVD #125D

City, State

HIGHLAND BEACH

FL

Zip Code & Country

33487

Title

D

Name (Last, First, Middle, Title)

EPPLER

GLENDA

-or- Entity Name

Street Address

3212 S OCEAN BLVD

City, State

HIGHLAND BEACH

FL

Zip Code & Country

33487

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

ATTACHMENT

40088513

902000073611

City, State

HIGHLAND BEACH FL

Zip Code & Country

33487 USA

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

President

Officer/Director Signature

[Signature]

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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#P02000673611



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June 15, 2005

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed are three separate corporation forms that were filed March 14, 2005. These were just returned to our office today, June 15, 2005. I assume the only correction required was signatures on all.

I would ask that you waive the late fee as these were submitted in March.

If there is anything omitted please inform me immediately so I can make the necessary corrections.

Thank you for your prompt attention in this matter.

Sincerely,



June Blake
President

John P. O'Grady, Inc. Realty

2809 South Ocean Boulevard • Holiday Inn Poolside • Highland Beach, Florida 33487
Telephone 561.272.2434 • Facsimile 561.272.6108 • E-Mail <http://www.oqgrady@oqgradyrealtyinc.com>